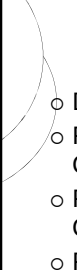


Consumer Complaints


DWAC Meeting

July24, 2012



Customer Complaints

- Definition of Complaints
- Role of DHHS Customer Service Call Center
- Role of DMH/DD/SAS Advocacy and Customer Service Staff
- Role of LMEs/MCOs
- Role of DMA



Definition of Complaints (used by DMH/DD/SAS and DMA)

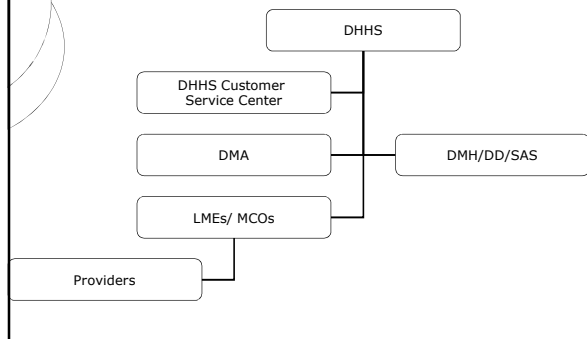
"Complaints/Grievances or Concerns" as per 42 CFR 438.400, is an expression of dissatisfaction about any matter other than an action, as "action" (denial, reduction, suspension, or termination of service)

The term is also used to refer to the overall system that includes grievances and appeals handled at the MCO or PIHP level and access to the State fair hearing process.

Subjects of Grievances

(As noted in 42 CFR 438.402 - Possible subjects for grievances include, but are not limited to, the quality of care or services provided, and aspects of interpersonal relationships such as rudeness of a provider or employee, or failure to respect the enrollee's rights.)

North Carolina Information and Customer Service System



DHHS Customer Service Call Center



- Serves as the Central Office for all Customer Service calls to DHHS
- 1-800-662-7030
- Staff listen for key words during the conversation in order to determine which agency can best assist the callers
- CARE-LINE is no longer available

DHHS CUSTOMER SERVICE CENTER CALL RESOLUTION BY CODING

May 2012 Data



LME referral	95
Transfer to DMH Cust Svc	14
Transfer to DMA	2
General Information	31
Medicaid	3

DHHS Customer Service Calls Sent to LMEs/ MCOs




- o Type of Calls Sent to LMEs/ MCOs
 - Access to services
 - Complaints about specific providers
 - Calls from providers
 - Request for Substance abuse programs
 - Questions about DWI classes, etc
 - Need therapy, mental health, substance abuse or developmental disability services
 - A provider has not provided appropriate service/ questionable quality

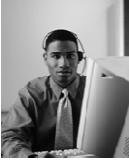
DHHS Customer Service Calls Sent to LMEs/ MCOs Data

KEYWORD referral information	Total
• Advocacy - Disabled	0
• Alcohol Abuse /Treatment & Rehabilitation	1
• Alzheimer's Disease	0
• Attention Deficit Disorder	0
• Autism	0
• Behavioral Health	3
• Counseling	3
• Drug Abuse/Treatment	22
• Gambling Addiction	0
• Mental/ Emotional Health	5
• Rehabilitation/ Inpatient	5
• Psychiatric Treatment/ Outpatient Treatment	0
• Smoking Addiction	0
• Transportation	0
• Adult/ Group Homes	2

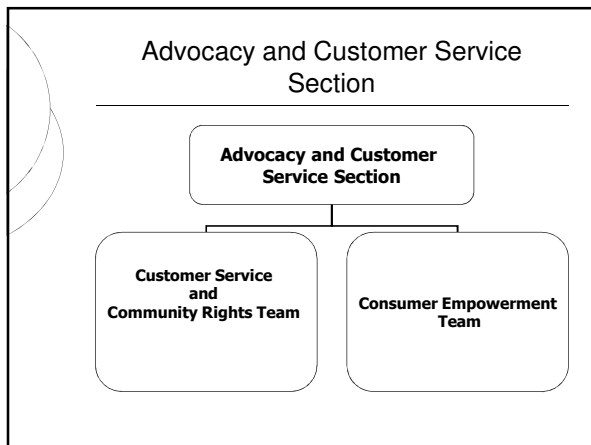




Referrals by LME	Total
Alamance-Caswell	1
Beacon Ctr	1
CenterPoint	2
Crossroads Beh	2
Cumberland	4
Durham	1
East Carolina Beh	11
Eastpointe	0
Five County	3
Guilford	2
Johnston	3
Mecklenburg	7
Mental Hlth Partners	2
Onslow Carteret Beh	1
Orange-Person-Chatham	4
Pathways	3
PBH	9
Sandhills Ctr	6
Smoky Mtn Ctr	9
Southeastern Ctr	0
Southeastern Reg	2
Wake	12
Western Highlands	5





May
2012



Information and Referral


- Provide information about all types of resources- including non- mh, dd and/or sa service
- Calls, letters and e-mails from consumers, families, providers, stakeholders and general public
- Letters sent to the Governor and Legislators are forwarded to our office.






Non-Medicaid Appeals


- Filed by a Consumer or Legal Guardian who disagrees with LME/MCO decision to Deny, Suspend, Reduce or Terminate a state funded MH, DD and/or SA service
- LME/MCO conducts a Reconsideration review
- A Reconsideration Decision can be further appealed to the State
- LME/MCO Director makes the final decision in Non-Medicaid Appeals



Complaints




- Calls, letters and e-mails from consumers, families, providers, stakeholders and general public
- Assist callers in following the Complaint Rule (10A NCAC 27G .0606) and obtaining follow-up from the agency from which complaint was filed.
- Many calls are referred to LME/MCO in order to obtain quick resolution regarding services (such as lack of access and provider quality)
- Data is collected from each call, letter and e-mail and summary reports can be developed in order to provide information to other teams about issues of concern



Review of Complaint Rules Document

- Please see Handout



Examples

- Example of Staff Being Rude- Handled at LME/MCO Level
- Example of Wanting to Change Providers- LME/ MCO handles and possible targeted monitoring
- Example of Fraud/ Billing Issues or Client Rights Violations across LME/MCO areas- State handles (DMA Program Integrity if Medicaid is the payor)
